THE STATE OF COLORADO 1915(b) PROGRAM

Project Name: Primary Care Physicians Program (MMC) (CO02.R09)

Effective Dates: January 7, 1995 First Renewal Submission: April 21, 1997

First Renewal Effective: March 1, 1998 – February 29, 2000

1st 90-day Temporary Extension: March 1, 2000 – May 29, 2000

2nd 90-day Temporary Extension: May 30, 2000 – August 27, 2000

3rd 90-day Temporary Extension: August 28, 2000 – November 25, 2000

Second Renewal Submitted: August 25, 2000

4th 90-day Temporary Extension: November 26, 2000 – February 23, 2001

5th 90-day Temporary Extension: February 24, 2001 – May 24, 2001

Second Renewal Approved: April 23, 2001

Second Renewal Effective: April 24, 2001 – April 23, 2003

PROGRAM SUMMARY:

The State of Colorado submitted a proposal under Section 1915(b)(1) of the Social Security Act authority to operate the Managed Care Programs (capitated MCOs and the Primary Care Physicians Program (PCPP)). Sections waived include 1902(a)(1), Statewideness; 1902(a)(10)(B), Comparability of Services; and 1902(a)(23), Freedom of Choice. The objective of the waiver is to reduce costs, prevent unnecessary utilization, reduce inappropriate utilization, and assure adequate access to quality care for Medicaid recipients. The waiver program will be operated directly by the Medicaid Agency.

The basic concept of the waiver is to enroll Medicaid recipients into an MCO or PCPP, which will provide or prior authorize all primary care services and all necessary specialty services. Its intent is to enhance existing provider-patient relationships and to establish a relationship where there has been none. It will enhance continuity of care and efficient and effective service delivery.

The waiver population includes eligible TANF, TANF-related, SSI, and SSI-related recipients. Enrollment into the waiver program is mandatory.

The Managed Care Program that includes the PCPP and the MCO capitated program is administered in 59 or 63 counties statewide. Exclusions are the counties of Costilla, Hinsdale, Kiowa, and Mineral. The PCPP or MCO have no providers in those 4 counties at this time. Rocky Mountain HMO is approved to enroll Medicaid clients statewide. Their intent is to become operational a region at a time and to be statewide within the next two years. Medicaid recipients are not required to select or be assigned to a Managed Care Provider if they reside in a county with less than two Managed Care Providers or live 30 miles or 30 minutes from the closest PCP or HMO. However, a Medicaid recipient may select a PCP or obtain medical care from Medicaid enrolled providers in contiguous counties.

Under this waiver, PCPP case managers are reimbursed a fee of \$4.70 per member per month for patient management services.

HEALTH CARE DELIVERY:

The MCO or PCPP is responsible for monitoring the health care and utilization of non-emergency services. The MCO or PCPP will assist the participant in gaining access to the health care system and will monitor on an ongoing basis the participant's condition, health care needs, and service delivery. The managed care provider will be responsible for locating, coordinating, and monitoring all primary care and other medical and rehabilitation services on behalf of recipients enrolled in the plan. Recipients enrolled in the program will be restricted to receive services included under the waiver either from the Managed Care provider or from another qualified provider to who the participant was referred by the Managed Care Provider.

BENEFIT PACKAGE:

All Medicaid covered services.

EXCLUDED SERVICES:

Not applicable.

LOCK-IN PROVISION:

Not applicable.

ENROLLMENT BROKER:

The State had the legislature requesting funds and authorization for an independent broker.

COST EFFECTIVENESS/FINANCIAL INFORMATION:

Colorado anticipates their savings to be approximately \$13,835,503.00 over the next two years of the waiver.

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